## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application of Docket Number 07334-335001

CLAIMS A	AS FILED	- PART I		SMALL E	NTITY			TUAN
The first of the second of the second	(Colum	n 1) (Col	umn 2)	TYPE		OR		R THAN ENTITY
TOTAL CLAIMS	14	$f_{ij}^{(r)}(x, f_i(x), x, y)$		RATE	FEE		RATE	FEE
FOR	NUMBER	R FILED NUM	BER EXTRA	BASIC FEE	355.00	OR	BASIC FEE	6.26.78.93
TOTAL CHARGEABLE CLAIMS	14 m	inus 20= *		X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS	15 n	ninus 3 =	2	X40=	the same	# 6 1903	X80≟	111
MULTIPLE DEPENDENT CLAIM I	PRESENT				Like Syring Walkania	OR	C. M. A.	16D.
If the difference in column 1 is less than zero, enter "0" in column 2			column 2	+135=	The second	OR	+270=	
CLAIMS AS	Maria San	The state	Maria de la como de la	TOTAL		OR	TOTAL	370
(Column 1)		(Column 2)	(Column 3)	SMALL	ENTITY	OR	OTHER SMALL	क्षितिहरू पर इस्स्ट्र
CLAIMS REMAINING AFTER AMENDMENT	· · · · · · · · · · · · · · · · · · ·	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
2 Total	Minus	* 20	त्र <b>१९४५ केटल</b> ्ड । इ.स.च्याच्याच्या	X\$ 9=5	(PARCH)	( ) OR	X\$18=	Charles of Carl
Independent	Minus	· · · · · · · · · · · · · · · · · · ·		X40=	The same	OR	X80=	H. S. C. C. S. C.
FIRST PRESENTATION OF N	ULTIRLE DE	PENDENT CLAIM	10 L C L L L L L L L L L L L L L L L L L	्र +135=	Wala Makasa An Assa	OR	+270=	
A STATE OF THE STA	Star Star			TOTAL		OR	TOTAL	第 <b>79</b> 年7年 第二年 7日 日
(Column 1)		(Column 2)	(Column 3)	ADDIT. FEE			ADDIT. FEE	
CLAIMS REMAINING AFTER AMENDMENT  Total  Independent  *	397 347 (200)	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total	Minus	**	=	X\$ 9=		OR	X\$18=	
Independent •	Minus	***	=	X40=	,	OR	X80=	an dejetaja
FIRST PRESENTATION OF M	ULTIPLE DE	PENDENT CLAIM						14 PH 1
新聞記載を与うという。 Politiques of the control of the cont				+135= TOTAL		OR	+270= TOTAL	
(Column 1)		'O ' O	7 0	ADDIT. FEE		OR ,	ADDIT. FEE	
(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)			' <b>r</b>		
REMAINING AFTER AMENDMENT  Total *  Independent *		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total +	Minus	**	=	X\$ 9=		OR	X\$18=	
Independent +	Minus	***	=	X40=			X80=	
FIRST PRESENTATION OF M	ULTIPLE DE	PENDENT CLAIM				OR		
				1 405 1	1		. 070	
* If the entry in column 1 is less than t ** If the "Highest Number Previously P	ne entry in colu	mn 2. write "0" in col	umn 3	+135= TOTAL		OR	+270= TOTAL	